

Invoice Reimbursement Form Instructions

Purpose

At the beginning of each Fiscal Year (FY) or contract period the Office of the Attorney General (OAG) provides each grantee an Invoice Reimbursement Form. The Invoice Reimbursement Form shall be submitted with the required attachments. The grantee must have an executed Texas Statewide Automated Victim Notification Service (SAVNS) Contract with the OAG to request expenditure reimbursement.

When to Submit Invoice

Upon receipt of the Certified Vendor (Appriss) invoice dated after the execution of the OAG contract between the OAG and County.

Required Attachments

The following documents must be attached to the Invoice for OAG payment reimbursement.

1. Copy of the Certified Vendor Invoice,
2. Copy of the payment issued to the Certified Vendor, or
3. Written justification, signed and dated by the Authorized Official, explaining the need for Pre-reimbursement funding,
4. County Verification of Continuing Production Record Form,
5. Copy of the current Certified Vendor/County Service Agreement Renewal Notice Form, and
6. Letter designating an alternate signatory, if applicable.

Due Date and Reimbursement Requirements

The Invoice and supporting documents must be **received by GAD no later than 20 calendar days** after receipt of the Certified Vendor Invoice (Appriss). For example, February 20 is deadline for GAD to receive the January 2012 invoice and reports.

No Invoice will be paid by the OAG without the current contract year Invoice and supporting documentation.

INVOICE INSTRUCTIONS

- **Phase Type:** Place an “X” next to the applicable phase for which the County is submitting an invoice.
- **Date of Invoice:** Enter the date the Invoice is mailed; use the format mm-dd-yyyy.
- **Invoice Number:** If your agency has an invoice numbering system, include an assigned number in this space (optional).
- **Texas TIN:** The 14-digit number issued by the State of Texas Comptroller’s Office.
 - For new grantees, please use the following link to request a 14-digit number from the Comptroller’s Office: <http://www.window.state.tx.us/taxinfo/taxforms/ap-152.pdf> .

- Direct deposit forms are available from the Comptroller's Office:
<http://www.window.state.tx.us/taxinfo/taxforms/74-176.pdf> .
- **Organization Information:** Provide the county name as listed on the OAG grant contract. Include the mailing address, city, state initials, and zip code.
- **Contact Person Information:** All contact information for the person preparing the form must be included. The signatory of the Invoice **cannot** be the same person who prepared the form. Please include the contact person's full name; title; email address; and telephone number.
- **Month of Service:** Enter the month and year the expenditure was paid for services delivered; use the format mm-yyyy (the cell format will automatically convert this number, i.e. 06-2012 will be converted to display Jun-12).
- **Amount of Claim:** Enter the total grant expenditures paid for the date of service listed. The total invoice amount should match the total expenditures on the Certified Vendor Invoice.
- **Authorized Official:** Authorized Official is the individual given the authority to sign all grant requests, inventory reports, progress reports, and financial reports or any other official documents related to the grant on behalf of the grantee.
- To designate another person authority to sign the Invoice, please submit a signed and dated written request on agency letterhead signed by the Authorized Official. (i.e. this could be the County Auditor).

Verification of Continuing Production Record

The Verification of Continuing Production Record form must be attached to the invoice for the OAG to process your payment reimbursement.

- **Grantee:** Enter the grantee name as it appears on your OAG contract.
- **Contract Number:** Enter the contract number as it appears on your OAG contract.
- **County Responsibility Grid:** Enter "Yes" or "No" under each line item as applicable to your agency. Unchecked or checked "**No**" boxes must provide a written explanation in the box labeled "Explanation/Comments".
- **Signature:** The Authorized Official must sign the form before submitting to the OAG. Failure to attach this form with your invoice will delay payment processing.

Invoice Submission

Number of Copies

Prepare an original for the OAG and retain one copy for your financial records. Only forms with an **original** signature can be paid, do not send copies. **Fax and email forms will not be accepted**, unless specifically requested by the OAG.

Retention

Detailed supporting documentation for this form must be kept for four years or longer in accordance with the Office of Management and Budget (OMB) and Uniform Grant Management Standard (UGMS) cost principles. All supporting documentation must be available upon request of the OAG or OAG's designee.

Transmittal

The Invoice must be mailed to:

Office of the Attorney General
Grants Administration Division – MC 005
P.O. Box 12548
Austin, TX 78711-2548

Corrections/Questions

If you have any questions, or discover an error after sending the reimbursement request, immediately contact the SAVNS Program Manager Chris Gersbach at chris.gersbach@oag.state.tx.us or 512-936-1653.